

0:00:00 - (A): Carcinogens that cause cancer, lung cancer. Did you know that right now on the FDA's website they list that they have approved 600 chemicals to be add tobacco, cigarettes and tobacco snuff that are synthetically manufactured chemicals. 600. But they're going to tell you tobacco and nicotine in tobacco are the carcinogen. Did you know that the paper of cigarettes in the actually they laced it with arsenic. Do you know that arsenic is a cancer causing chemical? And do you know they started adding sugar into the tobacco product inside the cigarettes and when you burn sugar and that sugar gets inside of your lungs where arsenic is, do you know that sugar is an immune suppressant and allows cancer to thrive?

0:00:48 - (A): So you cannot trust the entire narrative you're hearing about tobacco and this is going to get way worse than you think about just venom being in plasmids causing COVID and then these vaccines because you're going to realize just how far they will go to lie to all of us to make us sick. Diseased, it's awful in the perspective of tobacco and nicotine. So when I say nicotine is not addictive in January of this year, Jason Sherka, there is a published paper they collected people from around the world who had a myriad of what they compiled were 21 total long hauler COVID symptoms that people had to be having still, for a year and a half after having COVID unrelated to the vaccines.

0:01:35 - (A): This year, January 2023, they wanted to do a study to see how many of the symptoms of people struggling with COVID-19 can we find the worst cases and then can we give them a treatment that will cure them of their symptoms? Finally, after exhausting all of the measures, medication, supplements, rehab, some of those symptoms are these. So think about this at home, people. Does anyone you know and still love who had a mild case of COVID ever in the last four years? Do any of them still struggle with loss of taste and smell at all? Do they struggle with any ringing in their ears at all? Do they struggle with any cognitive impairment at all? Do they struggle with any motor deficits? Picture Parkinson's shuffling their feet. Do you know anybody who's had that since having COVID?

0:02:18 - (A): Do they have exercise induced lethargy? Do they have dyspnea, which is the inability to take a deep breath? Are they challenged breathing wise? Are you seeing people in your life walking upstairs and having to stand there to catch their breath still two years later after having a mild case of COVID? Do you know anybody who's struggling with tachycardia, arrhythmias or palpitations chest pains at all since having COVID?

0:02:41 - (A): Do you know anybody that you love at home and just, you know the reason why I'm doing this? 37% of all people worldwide who had any COVID are reporting these symptoms right now. Wow. So if you don't know somebody, it's because you're not going outside or you don't call anybody or you're a hermit. So when I say, do you know any of these people? You should. Do you know anybody who did not have diabetes and then got a mild case of COVID and now has been diagnosed with diabetes? That's one of the criteria.

0:03:07 - (A): Do you know anybody who did not have high blood pressure before they got COVID year ago, two years ago, and now have been diagnosed with high blood pressure and are now on high blood pressure drugs for life? Do you know those people? Do you know anybody now struggling with insomnia since having a mild case of COVID? Do you know every single one of those symptoms is actually caused by snake venom? All of them. And do you know that this study in January of 2023, did you know that they actually said, we are going to do a treatment with these people still struggling for a year and a half, that nothing else has freed you of your symptoms and we're going to ask you to do one thing and one thing only. For six days only, these people had struggling for two years, year and a half to two years.

0:03:48 - (A): They only asked them to do one thing for six days. And Jason, 100% of all their symptoms went away.

0:03:54 - (B): And what was that one thing?

0:03:56 - (A): A seven milligram nicotine patch. Every day, once a day, they asked him every morning to put on a patch of seven milligrams nicotine patch world. They only sell three types seven milligrams, 14 milligrams and 21 milligrams. They asked them to take the smallest patch size and wear one either on their arm or leg, wherever they didn't care. Put it on their body every morning, put on a new one for six days. Only 100% of all their symptoms went away.

0:04:24 - (A): That was this year. Oh, my God. The French researchers in April of 2020 begged governments around the world to use nicotine patches, nicotine gum, to rid the world of the pandemic. And they all turned their back and then lied to all of you and then said, don't trust any nicotine containing tobacco product instead. Okay, people, let's bring us forward. You ready? Oh. In the paper, they describe why they hypothesized this was going to work. And they quoted two studies, and they said, because the spike protein gene of COVID is from king cobra venom and from cratesnake venom, and they target nicotine receptors.

0:05:03 - (A): And we hypothesize nicotine because it has a binding affinity 30 times more, 30 times more than acetylcholine and venom. It would release the venoms and the symptoms would come back on. Now, I want to explain. This may sound technical, but you got to get this. And we'll show the world this on every single cell of your human body. Jason, I didn't know this. Every single cell of your body has nicotine receptors.

0:05:29 - (B): I didn't know that.

0:05:30 - (A): Every cell macrophages in your body that clean up all the dead disease cells and toxins, your T cells, B, lymphocytes, everything that protects you and heals you. Every one of those cells has nicotine on them. Jason beta cells in your pancreas that release insulin to control diabetes and blood sugar. Beta cells are controlled by nicotine receptors. And when venom binds to a nicotine receptor on a beta cell, every time they do that, venoms are called antagonistic to nicotine receptors.

0:06:05 - (B): What do you mean by that?

0:06:06 - (A): Antagonistic means it shuts off the receptor. So you have these cells floating around. They got these little receptors out there. Picture a light switch on your phone or on your wall. An antagonist will turn off the light. And an agonist this is what they call it. An agonist turns on the light, which would be the nicotine function of the cell would be you turn on the light with nicotine. An agonist, the most perfect agonist in nature, and then you turn it off with the two top most published antagonists are snake venom and cone snail venom in the ocean. Antagonist to nicotine receptors.

0:06:43 - (B): Other than the associations that we have with nicotine, because generally people go to cigarettes, smoking, things like that, is there anywhere in nature where we can get nicotine? Is nicotine a natural thing that we see in nature, in food or whatever it may be?

0:06:58 - (A): Yeah, that was one of my questions I was like in my life. I believe God created us and created this world. So if he created the tobacco plant and put nicotine into it, what other plants did he do that inside of? So, in the last year I did not know this until this year. You just have to go ask questions and go research. Do you know that the second highest containing nicotine, food or plant in the whole world is eggplants?

0:07:21 - (A): No, it's tobacco and then eggplants. Do you know that every night shade vegetable has nicotine in it?

0:07:29 - (B): Can you list those for anybody who.

0:07:31 - (A): Doesn't know what squash, zucchinis. Those are nice shades, tomatoes. These are all nice shades. Did you know red tomatoes have nicotine in them? And do you know that green tomatoes have ten times more nicotine than a red tomato? Does anyone in the world know that every white potato you've ever eaten has nicotine in it? Did you know every cauliflower you've ever eaten has nicotine in it? Did you know celery has nicotine in it? And then I'd like to ask you at home, if nicotine is so addictive, why aren't more people addicted to veggies?

0:08:02 - (A): And have you ever had a coworker at work? Have you ever heard this walk by your boss's manager's office or whatever, and you heard a coworker begging for a celery break? You're going crazy. I got to get my celery break outside. No, that's because nicotine is not addictive. But they are begging to go outside for their tobacco breaks of smoking because they added Pyroazines to make nicotine addictive.

0:08:27 - (A): We altered it. These vegetables that I just listed all have nicotine in them. And I didn't make them. Science didn't make them, nature made them, or God made them. My opinion, god made them. And in my opinion, I'd like to know, why does God put that into our food? And then why did he design us to have nicotine receptors in every part of our body if we weren't supposed to benefit from the nicotine in these plants?

0:08:52 - (A): How many people do you know have a general understanding that the better food they eat, the better their health is? And the better food list includes the veggies you all do. Isn't amazing that God would put these foods, that all these people are preaching, they reverse diseases with with eating it's. Curing cancers, curing autoimmune disease. If they will just focus on eating those veggies more primarily than processed foods and refined carbohydrates, it's incredible. God got it right the first time.

0:09:20 - (B): Would you say that the levels in those foods naturally could be enough to help somebody that's dealing with something like your wife was dealing with for two years? Or do you need the patch for more concentration?

0:09:31 - (A): The patches have more concentration. Tobacco has the highest content, obviously, so the nicotine patches, nicotine gums have a higher dose. But when you're talking about a six day window of time to relieve people of suffering they've been going through for two years, why would you not try it? Six days of nicotine. Let it go. In the study, by the way, they published for anybody reading this paper, if you're concerned about dependency on nicotine, they said not a single one of the participants after day six even thought about a nicotine patch or even wanted a nicotine anything. And my wife finds that OD everywhere we travel. We travel all week, every week, do a presentation somewhere. Thank God people still want to listen.

0:10:10 - (A): But sometimes we'll leave and we'll forget the gum or forget the patches. I wear the patches every day. She choose the gum every day, just how she likes to do it. I wear it for prevention. I just wear a two to three milligram patch. I cut them and wear one every day. Why, if it benefited smokers, to have a little bit of nicotine circulating? Anybody? Why not? If God put it into plants, why am I to question what he created? So I'll use benefit of some.

0:10:31 - (A): So I just want you to know, when we leave, it's really OD, though when we get home and we see the nicotine or see the gum, we're like, oh, man, we forgot all about but you would think you

would be super addicted. It's been one shocking reality for my wife that it is not an addicted experience. And the researchers actually said not a single person had any dependency whatsoever after the nicotine. And they don't expect anybody else in the world to have it, either.

0:10:53 - (B): One of the big reasons. I really wanted to focus on the antidote. Why we named this interview the antidote is not just because we need something for what happened in the past, but right now we're seeing headlines come up all around. Like you said, they're already starting to announce masks, mandates, potential lockdowns and so on and so forth, meaning they're planning for another. And I'll say it like this pandemic, because we understand that it's not exactly what they told us it was. Now, back in April of this year, four or five months ago, I was given information that I'd love to hear your thoughts on from the TLS organization.

0:11:29 - (B): They asked me to put out information. It was a four or five minute video having to do with a future outbreak and pandemic that's being planned that people need to prepare for through awareness and knowledge. You are a part of that plan. That's why we're sitting here right now. At the time, it was on April 4 of 2023. When this came out, I think it was April 4 of 2023. They basically connected the avian flu to something that they're going to be connecting to the future of what we're seeing now with future outbreaks, the coronavirus and so on and so forth.

0:12:03 - (B): What do you know about that? What do you know about that's upcoming? And will this antidote that you're speaking about with nicotine be now a preventative to this future outbreak or pandemic that we're moving into?

0:12:16 - (A): Yeah, it's a great question. So even when you just asked me that question, I was like when you said that I was a part of this for this very reason of what they know is coming, all of a sudden I got chills because I was like, oh my God. I actually felt the impression to go research something just like five days ago because felt like somebody needed to hear something about what they're about to release or what they're going to tell us is a next pandemic.

0:12:36 - (A): And it is actually very identical to two of them. So there's going to be two discussions you're going to hear here. Really three already. You're hearing about this new variant of COVID coming out in America called Eris, supposedly in September this month sometime. Don't worry about that crap. You can let that go. Don't worry about that. What they're going to be setting the stage for is something they're calling Ebola virus and Marburg virus outbreaks.

0:12:59 - (A): And that's the impression that I want your audiences to know about and I believe is the warning they need to have. So I want you to be aware that in the last ten years they have been studying what are plant based extracts that prevent the Marburg virus and the Ebola virus from getting inside the cells of a human to infect it. And they've published what is the most effective thing to do. That and for these two supposed viruses, they actually target entry into the cell through something called TPC two receptors.

0:13:37 - (A): And if the TPC two receptors are blocked, those viruses can't get in and you can't get sick at all. Your body will just eliminate this supposed infection for both Ebola and Marburg. So then I looked up, what are TPC two inhibitors? And just for the audience, I didn't care to know what TPC stood for. I didn't even care. I just want to know, what do they know? In nature blocks this receptor from allowing a virus in.

0:14:04 - (A): And they published the most potent thing that actually does that is a component found in grapefruits and in tomatoes, and it's called Nagarinin G-N-E-G-A-R-I-N-I-N. It's a component found in

tomatoes and tomato paste. It's also found in high levels in grapefruit, and it completely blocks the ability of that to get in. Now, I do have to speak to this though. Once again, in nature, there's a solution already the Marburg virus is identical to.

0:14:35 - (A): And if I can give some love to Zebzelinko. Dr. Zebzalenko. Dr. Zebzalenko texted me a month before he died, and he said, Dr. Aris, the next pandemic that's going to be coming, it's going to be coming out of China, and it's going to be called the Marburg virus. And I said, hey, Zev, it's great to hear from you. Zev, it's great to hear from you. And he goes, no, I just want you to know that if I die and something happens to me, I need you to make sure you let the world know. We already know there is an ant.

0:15:00 - (A): And I said okay. I'll let him know. And he goes, the antidote is zinc. And I said, awesome. Zev, if something happens to you, I promise I'll make sure the world knows that zinc's an antidote also for that. And then I said this to him a month before he died. Zev, do you know what the Marburg virus is? And he goes, no. And I said, The Marburg virus. I've already looked into this, which is ironic. It's named after a city in Germany, but it's going to come out of China.

0:15:29 - (A): The Marberg virus is actually the identical symptoms to every single venom found in the boom slaying snake in China. And they synthetically, have been manufacturing in biological weapons labs and pharmaceutical research labs, synthetic versions of boom slaying snake venom for decades in multiple factories all over China. And they're inserting them into plasmids and they are going to do the same thing. They're going to release it again.

0:15:54 - (A): Boom slaying snake venom is what causes the hemorrhagic effect. External bleeding out of your eyes, nose, mouth, skin, out of your anus. You're just going to bleed out all over the place. They're going to say you're going to fall over dead and see people all over the place just bleeding out of their bodies. That is the impact of boom slaying snake venom. And I told Zev that I said, so just go print out go print out Marburg virus and all of its symptoms. And then print out a snake's venom you've never heard of before, the boom slang snake venom. And just lay it side by side and you'll see that it's identical.

0:16:25 - (A): Now what's? OD. For all of you at home, this occurred this conversation with Dr. Zebzelinko. He died the very next month. The very next month. In August of 2022. Last year, Hollywood actually put out a movie called Bullet Train. So in this movie, you're hearing reference to a boom slang snake over and over and over. But it has no part of the plot of this movie. Now everyone is the dumbest movie ever.

0:16:48 - (A): No story to it.

0:16:49 - (B): I started it. I shut it off a few minutes and I couldn't take it's.

0:16:52 - (A): So dumb. But what the first scene grabbed my attention was and everyone else in my family fell asleep within five minutes because it's a boring movie, dumb movie. But I could recognize the symptomatology they were showing, mimics what the next pandemic is. Zevzalenko called me is about to come out. So I wanted to see what's going to be continuing in this movie. Boom slang snake is showing up in the movie over and over and over. You just see it slithering through the train and people running off, or it's just hissing at the audience.

0:17:18 - (A): But it doesn't do anything. It doesn't bite anybody. Nobody gets injured by it. So I'm just kind of watching this. And of course, the boom slang snake mentioning of that snake specifically in this movie was going to grab my attention. Then you're introduced to two co stars in the movie on the train

who are gonna be supporting Brad Pitt with whatever the purpose of the movie is, whatever the story is.

0:17:41 - (A): It's a black guy and a white guy. And they introduce each other by name, but then go by code names. And their code names are Lemon and Tangerine. And I was like, oh, my God. Why I'll get there? So lemon and tangerine. I was like, oh my God. They even told you the antidote inside of Lemon and Tangerine is the antidote to the Marburg virus and to COVID. Did you know vitamin C is inhibitory to all snake venoms?

0:18:13 - (B): Only because of you.

0:18:14 - (A): Do you know that's why? When Chinese researchers in Wuhan decided to treat every patient with high dose vitamin C in the hospitals in January of 2000, and 2100 percent of every Chinese patient went home by day five with this new novel, coronavirus pneumonia, they gave them 25,000 to 65,000 intravenous milligrams of vitamin C. And 100% of all their people went home. Totally. Well, you know what's amazing about that? They all went home. And then the Chinese government, which makes the most ascorbic acid, which is vitamin C in the whole world for the supplement industry, gave vitamin C to all of its citizens to prevent them from getting COVID the whole time during the pandemic.

0:18:59 - (A): Did America do that? Did American hospitals let their doctors give vitamin C when we were all asking them to do that for our loved.

0:19:06 - (B): Ones in the hospital?

0:19:06 - (A): No, it was we're being bribed with them. But that's severe. We're not going to give you vitamin.

0:19:10 - (B): C. And we're keeping liquor stores open.

0:19:12 - (A): And we're going to keep liquor stores open. So Lemon and Tangerine, these two guys introduce themselves on the train. And I'm like, oh, my God. They're even going to tell you the antidote. It fast forwards to the end. Not a joke. The villain shows up on the train, opens a trench coat. This female pulls out a vaccine and injects Brad Pitt with it right in the heart and injects whatever's inside there. But she tells him what it is before she injects to I'm going to inject you with boom slang snake venom stabs right in his chest.

0:19:44 - (A): And I'm watching this, and I'm like, oh, my God. They're even telling you. They're putting it in the shots. Brad Pitt looks down and goes, good thing I took antivenom this morning. Monoclonal antibodies pulls it out and injects it inside of her. And the lady's eyes start bleeding. Nose starts bleeding. Mouth starts bleeding. She kills over, and she dies.

0:20:01 - (B): Wow.

0:20:02 - (A): All right. They're just setting the stage for what's happening. Just so you know, with the coronavirus pandemic that they called the COVID-19 pandemic, the entire narrative of COVID-19 was also told by Hollywood in 2016. And then it aired February 2017 on NBC in 150 minutes. Show.

0:20:25 - (B): What are you talking about?

0:20:26 - (A): So there's a show called Blacklist still on Netflix. Go watch it right now if you want to think I was joking about the venoms being what they created COVID-19 with. Watch season four, episode 15 of The Blacklist that aired on NBC and is currently on Netflix.

0:20:44 - (B): Season Four episode 15 blacklist On Netflix Blacklist on Netflix.

0:20:48 - (A): The entire narrative of COVID starts with the main actor named Robert Reddington. He takes a drink of Scotch, takes a drink, seen Blacks. He wakes up in an ICU. He can't breathe. Doctors can't figure out what he's been poisoned with. They're trying to restrain him. He's a massive criminal, this guy is. But anyway, he's got this ICU, makeshift ICU somewhere in case someone ever tries to poison him or kill him. He's got someplace to go. Can't go into a hospital.

0:21:16 - (A): So he's woken up and you can't breathe. Oxygen levels are way down. He's been in there several days, but doesn't know how long. Doctor says you've been poisoned with something. We haven't figured out what it is yet. What happened to me? What happened to me? We don't know yet. We've only been able to stabilize you with Corticosteroids is what he says. Robert Reagan's like, how much time do I have to live? And he goes, we don't know. We don't know. You're poisoned with we're trying to figure that out.

0:21:41 - (A): It could be days, it could be minutes, it could be weeks. I don't know. And Robert rington goes, I ain't got time for this. And he rips out all of his IVs, and he leaves. And because he's so weak and stumbling around and can't breathe, he kidnaps this African American girl and asks her to break into a pharmacy for him because he can't do it. He can't breathe. Okay? She goes, what are we looking for in the pharmacy? They break open the door, go inside, and he says, I need corticosteroids and a bronchodilator.

0:22:12 - (A): And I'm like, watching this. And I'm like, oh, my God, this looks like COVID. This is before I came out. The week before I came out with my watch the water documentary. I was watching this. I was like, wait a minute. What? Bronchodilator was already confirmed by Dr. Richard Bartlett. Budecianide was a cure for COVID. And this dude says, I need a bronchodilator. Corticosteroids. Dr. Pierre Corey, ICU doc out of Wisconsin, is screaming to the world that they are minimizing how much corticore steroids they will allow us to give COVID patients. It will save their life. But they wouldn't go above six milligrams. That was the hospital protocol.

0:22:49 - (A): So I'm watching this, and I'm like, oh, my God, corticosteroid. She finds the corticosteroids, pours it into Robert reddickin's hands, and in the camera, it's just his face. He goes, I've tried to avoid this my whole life. Or something along these lines. I've been trying to avoid this my whole life. Corona of death. And then he passes out, falls unconscious on the floor. In the pharmacy. The FBI works with Robert Reddington. The FBI is trying to figure out what he was poisoned with. And they discover in the 40th minute or so of the show, the FBI has discovered what Robert Reddington was poisoned with in his drink to create his respiratory failure that required corticosteroids and a bronchodilator to help save his life.

0:23:33 - (B): Is it snake venom?

0:23:34 - (A): It ain't just snake venom. They say it's a venom peptide found in a very rare snake called the redheaded crate snake. And they show the crate snake on the screen. Now, this is not a joke. I was like, oh, my God. They just told the whole thing. When was this aired? When did this come out? And I go in and look. It was in February 2017 is when they published this. He drank the venom. The person who poisoned him, who got the venom to be put in his drink, that he drank, which is what I was researching.

0:24:13 - (A): This show was one of the things that I think God wanted me to see, to say, go tell the world you were right. It was only two days later is when I called Stu and Mike Adams and said, I've got

to tell the world. We have to do this. So in that, they determined it's cratesnake venom he's been poisoned with. But the guy poisoning Robert Reddington is also poisoning his wife. In the story, the wife wants to leave him, but this guy wants her to give him a child, and she's never done it.

0:24:43 - (A): So what he does is he takes the venom of these snakes and he puts it in an eyedropper and he puts it into their eye. One drop in her eye every day, and it paralyzes her. And she cannot walk. She's laying in bed. He's obviously raped her to get her pregnant, and he's just keeping her in this snake venom neurotoxic paralysis state in bed, but alive during the pregnancy. Just so you know, I told everybody, they're getting venom through the water into you, and it's going in through your eyes, and you're drinking it, and you're getting it through your eyes, in your skin, in your showers.

0:25:18 - (A): And conjunctivitis red eyes was a massively reported side effect of early COVID in the first year of the pandemic. And I'm watching this show and I'm like, oh my god, they did it. They told you the whole thing anyway. This is them telling you what they're doing. They will tell you. They have to show you. I don't know why they do it. They have their reasons for doing it. But this is what they're going to do with the marbury.

0:25:39 - (B): They call it predictive programming. They do it many, many times. White noise, I think, was a movie or a show or whatever it was on Netflix. It showed exactly what happened in Ohio with that train and all the toxic material that poured out from their exact place, exact way. That's what happened over there right before 911, six months before 911 happened. I forgot the name of the show. I'll get the name for you. Maybe we can even show it over here. But there's a show that actually shows in one of the episodes, planes going and hitting the towers that were remote controlled. It wasn't the people in the cockpit.

0:26:12 - (B): And then afterwards, it basically dives into this whole deep state of individuals doing things behind the scenes. So it's been going on for a long time. And some say that predictive programming is a way for individuals that understand how certain things work to tell you and put it out in the open to deal with the karmic consequences of not having to deal with it, because they at least let you know in a way that's in your that's it's interesting they do this.

0:26:41 - (A): So I want you to know that in the show, the FBI head looks at the other agent and goes, where would this venom come from if it's such a rare snake? And they said, there's only two places in the world that harvest is this cratesnake venom that could have been put in his drink. And this is where is it? One's in China and one's in Scranton, Pennsylvania. Now, this is important because I had. Already figured this out.

0:27:10 - (A): Operation warp speed. This push to get the COVID-19 vaccine mRNA technology in nine months forced on the whole American populace and all over the world. Do you know where the two scientists who created mRNA COVID-19 vaccines, do you know where they work? Currently at the university of Pennsylvania. Their names are Cataline Carico and Drew Weisman. These two individuals are credited with creating the mRNA COVID-19 technology in their shots.

0:27:38 - (A): And this is important. The venom that went to Robert Reddington came from a serpentarium. They said in Pennsylvania, a serpentarium is a place with snakes, store snakes. Yep. Sell snakes, harvest snakes, venom eggs, you name it. It was in this Pennsylvania case. All right, this is important. Catalina Carico and Drew Wiseman created.